

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS121AGC	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 06/08/2009
NAME OF PROVIDER OR SUPPLIER CONCORDE ASSISTED LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 2465 E TWAIN AVE LAS VEGAS, NV 89121		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 000	<p>Initial Comments</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.</p> <p>This Statement of Deficiencies was generated as a result of a complaint investigation conducted in your facility on 6/8/09 and 6/9/09. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division.</p> <p>The facility is licensed for 73 Residential Facility for Group beds for elderly and disabled persons, Category II residents. The census at the time of the survey was 51. Five resident files were reviewed and three employee files were reviewed. The facility received a grade of D.</p> <p>Complaint #NV00022180 was substantiated. See Tag Y223, Y250, Y253, Y272, and Y274</p> <p>The following deficiencies were identified:</p>	Y 000		
Y 103 SS=F	<p>449.200(1)(d) Personnel File - NAC 441A</p> <p>NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (d) The health certificates required pursuant to chapter 441A of NAC for the employee.</p> <p>This Regulation is not met as evidenced by:</p>	Y 103		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 103	Continued From page 1 Based on record review on 6/8/09, the facility failed to ensure 1 of 3 caregivers complied with NAC 441A.375 regarding tuberculosis testing (Employee #3). This was a repeat deficiency from the 12/30/08 State Licensure survey. Severity: 2 Scope: 3	Y 103		
Y 105 SS=E	449.200(1)(f) Personnel File - Background Check NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (f) Evidence of compliance with NRS 449.176 to 449.185, inclusive. This Regulation is not met as evidenced by: Based on record review on 6/8/09, the facility failed to ensure 1 of 3 employees met the background check requirements (Employee #3). Severity: 2 Scope: 2	Y 105		
Y 106 SS=E	449.200(2)(a) Personnel File - 1st aid & CPR NAC 449.200 2. The personnel file for a caregiver of a residential facility must include, in addition to the information required pursuant to subsection 1, (a) A certificate stating that the caregiver is currently certified to perform first aid and cardiopulmonary resuscitation.	Y 106		

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Y 106	Continued From page 2 This Regulation is not met as evidenced by: Based on record review on 6/8/09, the facility failed to ensure that 1 of 3 employees was trained in first aid and cardiopulmonary resuscitation (Employee #3). Severity: 2 Scope: 2	Y 106		
Y 223 SS=F	449.213(3) Laundry-Linen - Equipment, Venting NAC 449.213 3. The laundry room in a residential facility must be situated in an area which is separate from an area where food is stored, prepared or served. The laundry must be adequate in size for the needs of the facility and maintained in a sanitary manner. The laundry room must contain at least one washer and at least one dryer. All the equipment must be kept in good repair. All dryers must be ventilated to outside the building. If a washer or dryer is located outside the residential facility, the washer or dryer must be in a room or enclosure. This Regulation is not met as evidenced by: Based on observation on 6/8/09, the facility did not ensure its laundry equipment was in good working condition (1 of 5 washing machines and 2 of 5 dryers were inoperative). Severity: 2 Scope: 3	Y 223		

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Y 250 SS=F	<p>449.217(1) Kitchens-Equipment works; Clean and Sanitary</p> <p>NAC 449.217 1. The equipment in a kitchen of a residential facility and the size of the kitchen must be adequate for the number of residents in the facility. The kitchen and the equipment must be clean and must allow for the sanitary preparation of food. The equipment must be in good working condition.</p> <p>This Regulation is not met as evidenced by: Based on observation and interview on 6/8/09, the facility failed to use its sanitizing equipment properly (the dishwasher was not used for the wash cycle due to a lack of detergent).</p> <p>Severity: 2 Scope: 3</p>	Y 250			
Y 253 SS=I	<p>449.217(4) Adequate Supplies of Food</p> <p>NAC 449.217 4. The administrator of a residential facility shall ensure that there is at least a 2-day supply of fresh food and at least a 1-week supply of canned food in the facility at all times.</p> <p>This Regulation is not met as evidenced by: Based on observation and interview from 6/08/09 to 6/9/09, the facility failed to provide at least a 2-day supply of fresh food and at least a 1 week</p>	Y 253			

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Y 253	<p>Continued From page 4</p> <p>supply of canned food in the facility for 51 residents.</p> <p>Findings include:</p> <p>A tour of the facility's kitchen revealed the dry, refrigerated, frozen storage areas contained less than a 2 day supply of fresh food and less than a 1 week supply of canned food to feed 51 residents.</p> <p>On 6/8/09 at 2:30 PM, Employee #2, the facility's chef, remarked, "I have enough food to last until the noon meal tomorrow." The employee reported food delivery contracts had been cancelled because the owners failed to pay the outstanding balances, so food delivery companies would only deliver food supplies "cash on delivery." The employee further reported that he was purchasing the food as needed from the local discount food stores. Employee #2 added, "At times I purchase some of the food out of my own pocket. Also, I have to take time away from the facility to make the food purchases, sometimes several times a week." Employee #2 related he was unable to follow the standard approved menus because he did not have enough food on hand to follow the standard menu. Employee #2 provided copies of the ad hoc hand written menus he made based on his available food supplies.</p> <p>On 6/8/09 at 4:00 PM, the facility cook said "three snacks were available today, popcorn in the morning, ice cream at noon, and a cookie and muffin for the evening." Employee #2 related the ice cream snack was cancelled today because the Activities Director was not here. He further related, the muffins and cookies will not be the evening snack because they are not available,</p>	Y 253			

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Y 253	Continued From page 5 sandwiches will be substituted instead. Interviews with Residents #1, #2, #4 & #5 on 6/8/09, indicated they never know what is on the menu. On 6/8/09 at 3:15 PM, interview with Resident #5 indicated she was a diabetic who prepared her own meals because the facility failed to provide a diabetic adjusted meal. Resident #5, said "I do not know what is for dinner, I never do. The snack cart used to come around until January this year, now we have to request a snack." Employee #1, the Administrator, stated on 6/8/09 at 5:25 PM, "the snack cart was discontinued because it was an infection control issue." The evening meal on 6/8/09 consisted of pasta salad and a choice of a grilled cheese sandwich or a Sloppy Joe sandwich. No fruit or vegetables were served at the dinner meal. Shitake Foods representative, the facility's whole food provider, related on 6/9/09 they took cash only upon delivery at the facility. The representative further stated, "We won't deliver there any more because they didn't pay their May 22, 2009 bill of \$1029.23 when we delivered on that day." In addition to failing to pay outstanding food supply bills, Bureau records indicate the facility failed to pay their 2009 licensing fee and failed to submit a surety bond. Severity: 3 Scope: 3	Y 253		
Y 272 SS=F	449.2175(3) Service of Food - Menus NAC 449.2175	Y 272		

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Y 272	Continued From page 6 3. Menus must be in writing, planned a week in advance, dated, posted and kept on file for 90 days. This Regulation is not met as evidenced by: Based on observation and interview on 6/08/09, the facility failed to ensure a planned, dated and posted menu was utilized. Severity: 2 Scope: 3		Y 272		
Y 274 SS=C	449.2175(5) Service of Food - Substitutions NAC 449.2175 5. Any substitution for an item on the menu must be documented and kept on file with the menu for at least 90 days after the substitution occurs. A substitution must be posted in a conspicuous place during the service of the meal. This Regulation is not met as evidenced by: Based on observation and interview on 6/8/09, the facility failed to ensure menu substitutions were documented and retained for at least 90 days. Severity: 1 Scope: 3		Y 274		
Y 434 SS=F	449.229(3) Emergency Drills NAC 449.229 3. A drill for evacuation must be performed monthly on an irregular schedule, and a written		Y 434		

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Y 434	Continued From page 7 record of each drill must be kept on file at the facility for not less than 12 months after the drill. This Regulation is not met as evidenced by: Based on record review on 6/8/09, the facility did not ensure that monthly evacuation drills were conducted on an irregular schedule for the past 1 of 12 months (May of 2009). Severity: 2 Scope: 3	Y 434			
Y 435 SS=C	449.229(4) Fire Extinguisher; Inspection NAC 449.229 4. Portable fire extinguishers must be inspected, recharged and tagged at least once each year by a person certified by the State Fire Marshall to conduct such inspections. This Regulation is not met as evidenced by: Based on observation on 6/08/09, the facility failed to ensure that 15 of 15 facility fire extinguishers were inspected annually. Severity: 1 Scope: 3	Y 435			
Y 444 SS=F	449.229(9) Smoke Detectors NAC 449.229 9. Smoke detectors must be maintained in proper operating conditions at all times and must be tested monthly. The results of the tests pursuant to this subsection must be recorded and	Y 444			

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Y 444	Continued From page 8 maintained at the facility. This Regulation is not met as evidenced by: Based on record review on 6/8/09, the facility did not ensure smoke detectors were tested 3 out of the past 12 months (March, April and May of 2009). Severity: 2 Scope: 3	Y 444			

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